

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDOJuly 11, 2017
1-4

Page 1		Page 3
1	IN THE UNITED STATES DISTRICT COURT	1
2	FOR THE NORTHERN DISTRICT OF ILLINOIS	2
3	EASTERN DIVISION	3
4	CEDRIC LYN JOHNSON,)	4
5	Plaintiff,)	5
6	vs.) No. 15 CV 885	6
7	EVARISTO AGUINALDO,)	7
8	Defendant.)	8
9		9
10	The Deposition of	10
11	EVARISTO AGUINALDO, M.D., taken before	11
12	RENEE C. KERR, Certified Shorthand Reporter,	12
13	in the State of Illinois, County of Cook, at	13
14	Stateville Correctional Center, 16830 Broadway	14
15	Street, Joliet, Illinois, on the 11th day of	15
16	July, A.D., 2017, at 1 o'clock p.m.	16
17		17
18		18
19		19
20	Reported By: Renee C. Kerr	20
21	License Number: 084-001508	21
22		22
23		23
24		24
Page 2		Page 4
1	APPEARANCES:	1
2	BRYAN CAVE,	2
3	BY: MR. STEVEN G. TRUBAC,	3
4	161 North Clark Street	4
5	Chicago, Illinois 60601,	5
6	312.602.5000,	6
7	on behalf of the Plaintiff;	7
8	CUNNINGHAM, MEYER & VEDRINE, PC,	8
9	BY: MR. JOEL M. KOPPENHOFER,	9
10	One East Wacker Drive, Suite 2200,	10
11	Chicago, Illinois 60601,	11
12	312.578.0049,	12
13	on behalf of the Defendant.	13
14		14
15		15
16		16
17		17
18		18
19		19
20		20
21		21
22		22
23		23
24		24

ESQUIRE
DEPOSITION SOLUTIONSEXHIBIT B800.211.DEP0 (3376)
EsquireSolutions.com

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
5-8

Page 5	Page 7
<p>1 MR. TRUBAC: When was the last time?</p> <p>2 THE WITNESS: The last time? I don't</p> <p>3 know. Several years ago.</p> <p>4 MR. TRUBAC: How many times have you</p> <p>5 had your deposition taken?</p> <p>6 THE WITNESS: Five, ten, 15 times.</p> <p>7 MR. TRUBAC: And what types of cases</p> <p>8 were they?</p> <p>9 Were you a Defendant in them?</p> <p>10 THE WITNESS: I don't recall. I</p> <p>11 don't recall the situation.</p> <p>12 MR. TRUBAC: So because it has been a</p> <p>13 few years, I am going to go over the basics</p> <p>14 again very quickly.</p> <p>15 I will ask you a series of</p> <p>16 questions and ask you about some documents</p> <p>17 that I brought with me. It is very important</p> <p>18 that you allow me to finish my questions</p> <p>19 before you answer so that the court reporter</p> <p>20 can get everything down and so your counsel</p> <p>21 can object to something if he wants to.</p> <p>22 If you don't understand a</p> <p>23 question, please let me know; and, I will</p> <p>24 rephrase it. Otherwise, I will assume that</p>	<p>1 A What?</p> <p>2 Q Have you read the Complaint in this</p> <p>3 lawsuit?</p> <p>4 A Yes. I've read the Complaint.</p> <p>5 Q Are you aware of the allegations that</p> <p>6 are being made against you?</p> <p>7 A Yes.</p> <p>8 Q So you are familiar with the</p> <p>9 Complaint?</p> <p>10 A Right.</p> <p>11 Q Did you speak with anyone other than</p> <p>12 your attorney in preparing for this</p> <p>13 deposition?</p> <p>14 A No.</p> <p>15 Q Did you review any documents in</p> <p>16 preparing for this deposition?</p> <p>17 A I did read documents.</p> <p>18 Q And which documents did you review</p> <p>19 without getting into --</p> <p>20 A Pertaining to this case.</p> <p>21 Q Medical records?</p> <p>22 A Right.</p> <p>23 Q Pertaining to the Plaintiff,</p> <p>24 Mr. Johnson?</p>
Page 6	Page 8
<p>1 you understood the question and answered</p> <p>2 accordingly.</p> <p>3 If you need a break, let me</p> <p>4 know, and we will take a five minute break.</p> <p>5 Finally, your testimony today is</p> <p>6 under oath so it has the same force and effect</p> <p>7 as if you were testifying in court.</p> <p>8 THE WITNESS: Correct.</p> <p>9 EVARISTO AGUINALDO, M.D.,</p> <p>10 called as a witness herein, having been first</p> <p>11 duly sworn, was examined and testified as</p> <p>12 follows:</p> <p>13 E X A M I N A T I O N</p> <p>14 BY MR. TRUBAC:</p> <p>15 Q Dr. Aguinaldo, is there any</p> <p>16 medication or health condition that would</p> <p>17 impair your ability to understand my questions</p> <p>18 or have your deposition taken today?</p> <p>19 A No.</p> <p>20 Q Are you familiar with the lawsuit</p> <p>21 that brings us here today?</p> <p>22 A I think so.</p> <p>23 Q Johnson v. Aguinaldo.</p> <p>24 Have you read the Complaint?</p>	<p>1 A Correct.</p> <p>2 Q So before we get into the allegations</p> <p>3 of the Complaint, I just want to ask you some</p> <p>4 background questions.</p> <p>5 Doctor, where were you born?</p> <p>6 A Where was I born?</p> <p>7 Q Yes.</p> <p>8 A Philippines.</p> <p>9 Q How long did you live there before</p> <p>10 moving to the United States?</p> <p>11 A Probably about 30 years.</p> <p>12 Q When did you move to the United</p> <p>13 States?</p> <p>14 A 1975, '75 or '74.</p> <p>15 Q So you have a medical degree,</p> <p>16 correct?</p> <p>17 A From the Philippines.</p> <p>18 Q Where did you go to medical school?</p> <p>19 A In Manila, Central University.</p> <p>20 Q When did you graduate?</p> <p>21 A 1972.</p> <p>22 Q And you graduated with a degree --</p> <p>23 what degree did you get?</p> <p>24 A Doctor of Medicine.</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
9-12

Page 9	Page 11
1 Q Where did you do your residency?	1 for Wexford?
2 A In the Philippines, 1972, Manila	2 A Right. But between that there was
3 Medical Center; and, here in the states from	3 another contractor, between 1970 and '75,
4 1976 to 1979 in Norwegian American Hospital in	4 another company that take care of the prison.
5 Chicago, Illinois.	5 MR. KOPPENHOFER: Steve, I think he
6 Q Have you been practicing medicine	6 is thinking about their contract with the
7 since you came out of residency?	7 State and his own.
8 A Yes, sir.	8 BY MR. TRUBAC:
9 Q And in what general area?	9 Q Oh, okay. Let me clarify the
10 A Mostly general practice on the south	10 question.
11 side of Chicago.	11 I know Wexford has a contract
12 Q South side of Chicago?	12 with Illinois to provide services. Do you
13 A Correct.	13 personally have a contract with Wexford, like
14 Q Are you Board certified in any areas	14 an employment contract?
15 of medicine?	15 A Yes, sir. There is.
16 A No, sir.	16 MR. KOPPENHOFER: You mean a written
17 Q What did you do your residency in;	17 contract?
18 what area of medicine?	18 THE WITNESS: We signed a contract
19 A General practice.	19 with Wexford.
20 Q Both in the Philippines and United	20 MR. KOPPENHOFER: You did?
21 States?	21 THE WITNESS: Yes.
22 A Yes.	22 MR. KOPPENHOFER: Sorry.
23 Q So you mentioned that you -- do you	23 BY MR. TRUBAC:
24 have a practice, a private practice on the	24 Q What are you contracted to do for
Page 10	Page 12
1 south side of Chicago?	1 Wexford?
2 A Yes, sir, from 1979 to 1980 to 2000,	2 A I don't remember specifically what
3 2001.	3 the contract was.
4 Q And that was just general practice?	4 Q What do you do generally for Wexford?
5 A General practice.	5 A It is like a general practice. It is
6 Q Who is your current employer?	6 seeing and treating patients and prescribing
7 A 69th and Wentworth.	7 medication.
8 Q I'm sorry. Who is your employer?	8 Q Is that just in Illinois prisons; or,
9 Who do you work for?	9 is it also in other areas?
10 A When I was in private practice?	10 A Just in Illinois.
11 Q Right now.	11 Q So do you currently practice just at
12 A Wexford.	12 Stateville; or, are there other prisons that
13 Q Wexford Health Sources?	13 you go --
14 A Right. Wexford.	14 A I go once in a while to DuPage County
15 Q And do you have a contract with	15 Jail like every Wednesday, three or four times
16 Wexford?	16 a month.
17 A Yes. There is a contract.	17 Q But, otherwise, you are here?
18 Q How long have you worked for Wexford?	18 A Otherwise, I am here.
19 A I think we started like about 19 --	19 Q What are your general hours?
20 either '74 or '75.	20 A At Stateville?
21 Q You started working for Wexford?	21 Q Yes.
22 A Correct.	22 A 8 to 4.
23 Q So there was an overlap where you had	23 Q So I think I understand that you
24 a private practice and you were also working	24 currently work out of Stateville, correct?

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
13-16

Page 13	Page 15
1 A Correct.	1 A Here right now?
2 Q You worked at Stateville NRC previous	2 Q Yeah.
3 to this, I believe, correct?	3 A It is basically probably about 20, 25
4 A Yes, I did.	4 a day.
5 Q When was that?	5 Q And are those usually initial like
6 A I think 2008 until last year.	6 intake visits, or follow-up visits, or are
7 Q Why did you move?	7 they a combination of the two?
8 A I don't know. It is up to them.	8 A Are you talking about here now; or,
9 They can move us anytime they want.	9 on the other side at NRC?
10 Q Where did you work before Stateville	10 Q Here right now.
11 NRC?	11 A Usually, follow-up visits.
12 A Here. Stateville proper. Here.	12 Q Just for follow-up visits?
13 Q So how long have you worked at	13 A Some follow-up visits. Some also
14 Stateville whatever you might call it?	14 sick call.
15 A Probably from 2004, 2005 to the	15 Q Sick calls?
16 present time?	16 A Right.
17 Q Where did you work before that?	17 Q And what about in 2014 when you were
18 A I was still in Stateville, but	18 in NRC?
19 different company at that time. I think it	19 A It was usually mostly intake.
20 was about three companies before it was	20 Q Mostly intake?
21 Wexford.	21 A Yes.
22 Q So am I correct that you are	22 Q Would you do any follow-up visits at
23 essentially a general practitioner for inmates	23 NRC?
24 at Stateville?	24 A Correct.
Page 14	Page 16
1 A Correct.	1 Q You would?
2 Q Do you only examine inmates; or, do	2 A Yes. We do follow-up and intake at
3 you also examine staff members maybe?	3 NRC.
4 A Inmates most of the time.	4 Q So you do follow-up and intake visits
5 Q Is there a medical facility in	5 at NRC?
6 Stateville that you will actually examine	6 A Right.
7 patients in, or do you actually --	7 Q So you said currently you see maybe
8 A There is a healthcare unit over	8 about 20, 25 patients a day, something like
9 there.	9 that?
10 Q And is that healthcare unit both for	10 A NRC?
11 Stateville proper and NRC?	11 Q No, today.
12 A No. They have their own separate	12 A Something like that. Probably 15 to
13 healthcare unit in NRC and Stateville proper.	13 25. Let's put it that way.
14 Q So the allegations in this Complaint	14 Q What about in 2014? Was there a
15 are mainly in 2014.	15 different number because it was a different
16 So in 2014, I understand that	16 facility?
17 you were working at NRC, correct?	17 A It was probably more or less the
18 A Correct.	18 same; but, probably -- more or less the same.
19 Q NRC had its own healthcare unit,	19 Q More or less the same, okay.
20 correct, or has its own healthcare unit?	20 So I want to get into your
21 A Correct.	21 experience at NRC in 2014. So, basically, all
22 Q Dr. Aguinaldo, do you have just a	22 of my questions from here on in are going to
23 general idea of how many patients a day you	23 be about your practice as a general
24 see these days here in Stateville?	24 practitioner at NRC in 2014, 2015.

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
17-20

Page 17	Page 19
1 Do you understand?	1 Q Yes?
2 A Right. I understand.	2 A Yes.
3 Q Great. Excellent.	3 Q Are they all -- are all inmates who
4 In your experience when you were	4 go to the healthcare unit originally seen
5 working at NRC, did all inmates who requested	5 by -- first seen by a medical doctor; or, is
6 or required medical attention, were they seen	6 there like a screening process?
7 by a medical doctor?	7 A There is a screening process when
8 A Yes.	8 they come from the county jail. They screen
9 Q And by that -- I just want to make	9 them out.
10 sure I am clear -- a medical doctor as opposed	10 Q I'm sorry. Let's move past the
11 to like a registered nurse, or physician's	11 original intake.
12 assistant, or something like that.	12 So say an inmate has a medical
13 A Yes. They have to be seen by a	13 condition, and say they got into a fight, and
14 medical doctor.	14 they need stitches or something. They go to
15 Q They have to be seen by a medical	15 the healthcare unit.
16 doctor?	16 A If there is a fight you said?
17 A Correct.	17 Q Sure. Let's assume there is a fight,
18 Q Is that a regulation by the State, or	18 and it looks like they need stitches. They go
19 a Wexford regulation?	19 to the healthcare unit.
20 A I don't understand.	20 Is there a screening process
21 Q I will rephrase it.	21 there where maybe first they are seen by a
22 Why are inmates required to see	22 registered nurse or physician's assistant
23 a medical doctor? Is there a certain -- is	23 before being seen by a medical doctor?
24 there a certain regulation that requires you	24 A The first responder would be a med
Page 18	
1 to do that?	1 tech and the nurses, and they bring them to
2 A Well, when they come to intake,	2 the healthcare unit.
3 everybody has to be seen.	3 Q So the registered nurse or
4 Q When you say intake, are you talking	4 physician's assistant will respond initially;
5 about when they first come into the prison, or	5 and, then --
6 when they have a medical condition, and they	6 A They will see the med tech first or
7 come in for a visit?	7 the nurses. Then they bring them to the
8 A When they first come from the county	8 healthcare unit.
9 jail, they come for intake, they come for	9 Q When they are brought to the
10 screening.	10 healthcare unit, is that when a medical doctor
11 Q I think I may be using a term	11 will examine them?
12 incorrectly before. I'm sorry.	12 A Yes. That is when they examine them,
13 So by intake, you mean when they	13 when they bring them to the healthcare unit.
14 come into the prison and have their original	14 Q Dr. Aguinaldo, how many medical
15 physical exam, if you will?	15 doctors, if you remember, were there at NRC in
16 A Correct.	16 July of 2014?
17 Q What about when an inmate is already	17 A Including medical director?
18 in Stateville at NRC, they have already had	18 Q No. Just medical doctors. Someone
19 their intake, and then they get into a fight,	19 with a degree like you.
20 or they have some medical condition and they	20 A Around two. Including me, two, or
21 need medical attention. Are all inmates who	21 three sometimes. Because I am the full time
22 go to the NRC healthcare unit, are they all	22 over the nurses at the time, and there is a
23 seen by a medical doctor?	23 part-timer, and I don't know whether we have
24 A Correct.	24 other contractors at that time.

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
21-24

<p style="text-align: right;">Page 21</p> <p>1 Q So you were a full-time physician at 2 NRC, and there may have been a few other 3 part-time medical doctors? 4 A Correct. 5 Q Would you overlap in your shifts 6 sometimes; or, you know, when you were 7 working, you were the only medical doctor 8 there, and then there was a part-time worker 9 who was there? 10 Do you understand my question? 11 A No. I don't understand your 12 question. 13 Q So you said you were full time at 14 NRC, and there were a few part-time 15 physicians. 16 When you were doing your shift, 17 were you the only medical doctor on call, or 18 were there other medical doctors there as 19 well? 20 A When you said on call, it is the 21 medical director that gets the call. 22 Q Okay. 23 So when you -- during your 24 shifts -- because you said you worked from</p>	<p style="text-align: right;">Page 23</p> <p>1 Q So if an inmate has a condition that 2 is already known about, then you will see them 3 for intake? 4 A Right. We see them if they have 5 medical issue. We see them at intake. 6 Q What if someone doesn't have a 7 medical issue? 8 A If they don't have a medical issue, 9 then we will see them at another time for 10 physical examination. 11 Q Are you familiar with an Illinois 12 Department of Corrections form called an 13 offender injury report? 14 A I'm not really familiar with it, but 15 I have seen it before. 16 MR. TRUBAC: You have seen it 17 before. Okay. 18 I am going to hand you a 19 document that was produced to us by your 20 counsel. I would like to mark it as 21 Exhibit 1. 22 I would like you to review this 23 document and then let me know when you have 24 reviewed it. It is three pages, I believe.</p>
<p style="text-align: right;">Page 22</p> <p>1 8 to 4, correct? 2 A Correct. 3 Q Is that true also when you were at 4 NRC? 5 A Correct, yes. 6 Q So from 8 to 4, were you generally 7 the only medical doctor who was at the 8 healthcare unit at NRC? 9 A Generally. Some part-times come on 10 different days. 11 Q So let's actually go back to -- let's 12 go back to the general intake, which -- when 13 an inmate may be transferred to Stateville or 14 needs a general intake. 15 Do you perform those initial 16 physical examinations? 17 A Only if they have medical problem 18 that has medical issue when they go to 19 intake. 20 If they come with high blood 21 pressure, or anything like that, then there is 22 other guy who has to see them at intake so we 23 can prescribe medication. Otherwise, we 24 don't. They come in at another time.</p>	<p style="text-align: right;">Page 24</p> <p>1 (Document marked Exhibit 1 2 for Identification.) 3 BY MR. TRUBAC: 4 Q Dr. Aguinaldo, do you recognize this 5 document now that you have had a chance to 6 review it? 7 A Right. I recognize this one. 8 Q So when I was previously talking 9 about an offender injury report, this is the 10 type of form I was talking about. So you do 11 recognize this type of form? 12 A Correct. 13 Q How often do you see these? 14 A Depends. If there is some kind of 15 injuries like that, then we see them. 16 Q What are these used for? 17 A These injury reports are made by the 18 med tech or the nurses. 19 Q And what is a -- like medical 20 technician? 21 A Medical technician, right. 22 Q So is this something where the nurses 23 or the med tech would respond to an incident 24 or something and they would write this out?</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
25-28

Page 25	Page 27
1 A Correct.	1 Q Is that because most of the time the
2 Q What happens after they write this	2 nurse or med tech doesn't say that follow-up
3 out? What happens next?	3 with the medical doctor is required?
4 A Well, they tell us that there is some	4 A Probably.
5 guy that is injured, so they tell us we have	5 Q But if they do say that a follow-up
6 to summon them. When they make an injury	6 with a medical doctor is required, then you or
7 report, they talk to us sometimes. It's not	7 one of the other medical doctors at the
8 most of the time. Sometimes. Sometimes we	8 healthcare unit would see this document,
9 have to see this guy because sometimes they	9 correct?
10 make their own decision that they don't need	10 A Correct.
11 to be seen by doctor. They can be seen the	11 Q So let's go to the second page of the
12 following day.	12 document.
13 Q So the nurse, or the med tech, or	13 It looks like this document was
14 the -- do physician assistants ever fill these	14 signed by Marian Andrews who is a registered
15 out?	15 nurse.
16 A What do you mean?	16 Do you know Marian Andrews?
17 Q So you mentioned that nurses may fill	17 A I don't remember her before.
18 out these forms?	18 Q And so this document is dated
19 A Either the nurses or med techs.	19 March 10, 2014.
20 Q Are you familiar with physician	20 Under P, in the middle of the
21 assistants?	21 page, you see where it says treatment and
22 A There are physicians assistants here,	22 follow-up?
23 too.	23 A Yes.
24 Q And they may fill out these forms as	24 Q Am I correct in understanding that
Page 26	Page 28
1 well?	1 that means follow-up with M.D.?
2 A Normally, no.	2 A Yes.
3 Q So either the nurse or med tech would	3 Q So F slash U means follow-up?
4 then do an initial evaluation; and, they would	4 A Yes.
5 make the determination of whether or not the	5 Q And M.D. means medical doctor?
6 inmate needed to be seen by the medical doctor	6 A Right.
7 immediately; is that correct?	7 Q Now on the bottom of the page there
8 A Yes.	8 is a section that says to be completed by
9 Q Can you turn to the second page of	9 physician.
10 this document.	10 Do you see that?
11 Actually, let me ask you a	11 A Yes, sir.
12 question.	12 Q And what exactly is this portion
13 I know this was a number of	13 right here?
14 years ago, but do you remember in 2014	14 A This is just like a form whenever
15 reviewing this document?	15 somebody is injured. So it is up to them to
16 A No. I don't remember.	16 see whether we see them immediately, or have
17 Q About how many of these do you think	17 them appear in sick call. So at this time,
18 you have seen maybe per week of these	18 when -- probably at this time, I really don't
19 documents?	19 recall this thing that either he made first,
20 A Per week, very seldom.	20 or I see him first at the healthcare unit.
21 Q Seldom?	21 Q Okay. So let me make sure I
22 A Very seldom.	22 understand.
23 Not a couple a week. Maybe a	23 First of all, is that your
24 couple a month.	24 signature on the bottom of the page?

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
29-32

Page 29	Page 31
1 A Yes.	1 these boxes, correct?
2 Q And is that dated March 10, 2014?	2 A Correct.
3 A Correct.	3 Q So when it says, I would like to see
4 Q That is the same date as the document	4 this offender immediately, is that just
5 that was signed by Marian Andrews?	5 generally because the registered nurse has
6 A Correct.	6 said that follow-up needs to be done by an
7 Q So this says, I have reviewed this	7 M.D.?
8 report and would like to see this offender	8 A Not really.
9 immediately, correct?	9 As I said, again, no matter when
10 A Correct.	10 they bring us the inmate, when there is a
11 Q The immediately box is checked?	11 fight, I don't see a report like this. They
12 A Correct.	12 put them in the healthcare unit and we summon
13 Q Did you check that box? Do you	13 them. So I don't know if it was before or
14 recall?	14 after I sign it, but I signed this one.
15 A I don't recall.	15 Q So you may not even see this report
16 Q Are you formally the one who would	16 until after you have examined the inmate?
17 review these reports and then look at the	17 A Possible.
18 bottom of the page and make a determination of	18 Q If you didn't see a report like this,
19 which box to check?	19 which has subjective findings and objective
20 MR. KOPPENHOEFER: You mean a report	20 findings at the top, which looks to be the
21 that he signed off on, or all the reports?	21 initial report of the registered nurse, where
22 BY MR. TRUBAC:	22 would you get your information as to what the
23 Q So, specifically, for this type of	23 issue was with the inmate or what needed to be
24 report, when a registered nurse maybe says --	24 done?
Page 30	Page 32
1 they come up with this report and they say the	1 A Probably when I see this inmate in
2 inmate needs a follow-up with an M.D., and	2 the healthcare unit. As I said, I don't
3 then it goes to you, do you fill out the	3 recall before or after. I don't recall, but I
4 bottom of the form?	4 see inmate over there.
5 A I really don't recall whether I sign	5 Q Who would tell you what the problem
6 it after I see him or before I see him. I	6 was?
7 don't recall; but, I recall I see inmate on	7 So an inmate comes to the
8 that day, but I don't recall whether I was	8 healthcare unit, and --
9 signing either before or after.	9 A Anybody. Med tech, nurse, like that;
10 Q Let's forget about this specific	10 and, usually what they tell us is, Doctor, you
11 one.	11 forgot to sign the injury report.
12 Generally speaking, when you see	12 Q So it is probably the nurse or med
13 these, do you fill out the bottom of this form	13 tech who filled out this form who will then go
14 before you see the inmate?	14 with the inmate to the healthcare unit and
15 A Not necessarily because sometimes it	15 then tell you what happened, why they think a
16 depends.	16 follow-up is --
17 It is just like, as I said	17 A Sometimes. But not most of the
18 again, because it is up to them really.	18 time.
19 Q I'm sorry. Up to who?	19 As I said again, injury report
20 A Up to the nurses whether he has to be	20 is either you see them before or after you see
21 seen right away or appear in sick call.	21 the patient already. Then they will tell you,
22 Q But, regardless, either before or	22 Doctor, you forget to sign the injury report.
23 after you have seen an inmate, at some point	23 Q I am just trying to understand where
24 you would fill out this form and check one of	24 you get your information as to why this

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
33-36

<p style="text-align: right;">Page 33</p> <p>1 particular inmate needs to be seen, what 2 happened, what medical issues there may be. 3 A Most of the time, as I said, they 4 bring the inmate to the healthcare unit, and 5 they tell you some kind of finding. Then you 6 go in, and they are waiting right there to see 7 you.</p> <p>8 MR. KOPPENHOEFER: I think what he is 9 trying to tell you is he walks in the 10 examination room, and there is an inmate 11 waiting to see him. Somebody has put him in 12 there.</p> <p>13 MR. TRUBAC: Is that accurate, 14 basically?</p> <p>15 THE WITNESS: Yes.</p> <p>16 BY MR. TRUBAC:</p> <p>17 Q So it's possible you may go into the 18 examination room and you don't have any idea 19 what has happened until you talk to the 20 inmate?</p> <p>21 A That's correct.</p> <p>22 Q What if the inmate is unconscious or 23 something?</p> <p>24 A Well, the nurses will see something</p>	<p style="text-align: right;">Page 35</p> <p>1 make the injury report. 2 Q So when you see an inmate going into 3 the examination room, do you ever -- is it 4 your general practice to review their medical 5 history before actually examining them? 6 A Sometimes. Because most of the time 7 they don't have the record when they bring to 8 us in healthcare unit. They don't have the 9 record. Sometimes.</p> <p>10 Q The record maybe exists, but they 11 just didn't bring it with them? 12 A If they bring the record, you can see 13 it like that. Most of the time, just like 14 this case, most of the time they just bring 15 the inmate to the healthcare unit, and we just 16 see them already and talk to them what 17 happened, but we don't have the record 18 sometimes. Not most of the time. 19 It's not like in sick call where 20 there is a record there.</p> <p>21 Q Okay. So my understanding would be 22 that because this is sort of like a -- not a 23 scheduled visit, you don't necessarily have 24 access to their full medical history; is that</p>
<p style="text-align: right;">Page 34</p> <p>1 sometimes. 2 Q And for my own knowledge, what is 3 this PRN at the bottom of the form? 4 A PRN means whenever they want to come; 5 or, there is no specific date that they come. 6 PRN is whenever they want to come. 7 MR. KOPPENHOEFER: It means as 8 needed. 9 THE WITNESS: As needed. 10 BY MR. TRUBAC: 11 Q So I think we have sort of exhausted 12 this document, but to sort of reiterate, at 13 some point you would sign off on these 14 documents, whether it is before you saw the 15 inmate, after you saw the inmate, you would 16 sign the bottom of this form, correct? 17 A At some point. 18 Q At some point? 19 A At some point. 20 Q And before you signed the form, would 21 you make sure you read the report in its 22 entirety, or would you just sign it? 23 A I'd just sign it because, as I said, 24 I must have seen already this patient before I</p>	<p style="text-align: right;">Page 36</p> <p>1 correct? 2 A That's correct. 3 Q Is there -- if you had access to the 4 medical history, would you make sure to review 5 it before examining the patient? 6 A Correct. 7 Q So if the registered nurse or med 8 tech brought the medical history with them, 9 you would review that before examining the 10 inmate? 11 A Correct. 12 Q Do you -- in cases where you don't 13 have access to the medical history when the 14 inmate is brought to you, do you review it 15 after you see the inmate or no? 16 A Sometimes we don't even have the 17 record. So we get the paper, and we just 18 write on a piece of paper like that. 19 Q So what I am asking is if you don't 20 have the medical history at the time of the 21 examination, after you have already seen the 22 inmate and you are writing up your notes, do 23 you then try to actually request the medical 24 history to review it or no?</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
37-40

<p style="text-align: right;">Page 37</p> <p>1 A If there is, or I could just ask the 2 patient himself.</p> <p>3 Q So if you don't have access to the 4 medical history, do you always -- what sorts 5 of background questions do you make sure to 6 ask inmates?</p> <p>7 A In this case, just like him at that 8 time, I know nothing about him. All I know is 9 the guy is fighting. So I go in the room to 10 examine him and ask him if he has any other 11 issues.</p> <p>12 Q So you examine him, but do you ask 13 him if he has any medical conditions before 14 you examine him?</p> <p>15 A Correct. If there are some kind of 16 allergies, something like that.</p> <p>17 Q If someone had an injury to a 18 specific part of their body, say -- we will 19 use this example.</p> <p>20 Say somebody was punched in the 21 head. Would you then ask if they had any 22 history of head trauma or other -- other 23 injuries to their head?</p> <p>24 A Correct.</p>	<p style="text-align: right;">Page 39</p> <p>1 how when an inmate comes into Stateville and 2 they have a known medical condition, they 3 would be seen immediately for a physical 4 examination, is this the type of form that 5 would be filled out for those cases?</p> <p>6 A Right.</p> <p>7 Q And so it looks like -- first of all, 8 let me ask you this.</p> <p>9 Did you fill out any of these 10 forms? Do you recognize your signature on any 11 of these forms?</p> <p>12 A Yes. This is the form.</p> <p>13 Q Are any of these signatures yours?</p> <p>14 A This is my signature.</p> <p>15 Q Bates labeled Johnson 00036?</p> <p>16 A Yes. This has the intake already.</p> <p>17 Q So this is your signature at the 18 bottom of this form?</p> <p>19 A Right.</p> <p>20 Q Okay.</p> <p>21 And this is dated March 4, 2014; 22 is that correct?</p> <p>23 A Correct.</p> <p>24 Q And this is for Cedric Johnson who is</p>
<p style="text-align: right;">Page 38</p> <p>1 Q You would?</p> <p>2 A I would.</p> <p>3 Q And why is that?</p> <p>4 A Just to be sure there is not another 5 injury like that.</p> <p>6 Q To make sure that it may not be like 7 exacerbating or making worse the original 8 injury?</p> <p>9 A Correct.</p> <p>10 MR. TRUBAC: We will mark this as 11 Exhibit 2.</p> <p>12 THE WITNESS: This is the intake 13 process.</p> <p>14 BY MR. TRUBAC:</p> <p>15 Q Did you have a chance to review all 16 these pages?</p> <p>17 A No.</p> <p>18 Q Just take a look at all three pages. 19 You don't need to read them in detail.</p> <p>20 I think you were saying that 21 this is typically an intake form or pages 22 taken from a typical intake form?</p> <p>23 A Correct.</p> <p>24 Q So when we were talking before about</p>	<p style="text-align: right;">Page 40</p> <p>1 the Plaintiff in this action?</p> <p>2 A Correct.</p> <p>3 MR. TRUBAC: And just for the record, 4 Exhibit 1 was also an offender injury report 5 for Cedric Johnson dated March 10, 2014.</p> <p>6 MR. KOPPENHOEFER: So let me just 7 sort of clarify. The first page of the 8 exhibit was prepared by a nurse.</p> <p>9 MR. TRUBAC: Yes.</p> <p>10 So these pages may not be 11 necessarily part of the same document. These 12 are forms we received, medical records for 13 inmate Cedric Johnson that were all dated the 14 same day. That's why they are stapled 15 together, but they are not necessarily all 16 from the same document.</p> <p>17 As Counsel was saying, the first 18 page was signed by a registered nurse. The 19 second might be from a completely different 20 form. That's possible.</p> <p>21 THE WITNESS: Yes. This is all 22 intake documents.</p> <p>23 BY MR. TRUBAC:</p> <p>24 Q Do you recognize the third page of</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
41-44

Page 41	Page 43
1 this document, Bates labeled Johnson 00037?	1 wound?
2 MR. KOPPENHOEFER: He wants to know	2 A Gunshot wound in the back.
3 if you recognize the form, or this document.	3 Q And I think it says in the back of
4 BY MR. TRUBAC:	4 head?
5 Q Yes. You had mentioned that your	5 A In the back and head.
6 signature is on the bottom of the second page?	6 Q And it looks like slash 90.
7 A Correct.	7 Do you understand that to mean
8 Q Did you fill out this second page?	8 1990's?
9 A Yes.	9 A Correct.
10 Q Did you also fill out this third	10 Q And right underneath that it says HX
11 page?	11 of being beaten in the head with baseball
12 A Yes. That is the one.	12 bat.
13 Q So the second page and third page are	13 Does HX mean history?
14 all part of the same document?	14 A Yes.
15 A Yes.	15 Q And under recent drug, slash, ETH
16 Q Is there any reason why the intake	16 use, it says HX of seizures due to alcohol
17 would be done by both a registered nurse,	17 use.
18 which is on the first page, and then --	18 Does that mean history of
19 A This is the nurse, when they start	19 seizures due to alcohol use?
20 the screening process -- because she get the	20 A Correct.
21 history, and they report the history here,	21 Q And then under behavioral,
22 like high blood pressure and seizure, and this	22 appearance, under the objective of the form,
23 is the type of patient we have to see right	23 near the middle, where it says behavioral,
24 away after the screening process.	24 appearance, hearing loss, mental status,
Page 42	Page 44
1 Q So this first page is like an initial	1 trauma and skin condition, it says, needs
2 screening?	2 glasses, and no open skin areas present; is
3 A Right, but for the nurse.	3 that correct?
4 Q And then if -- because of what is	4 I know you didn't write that.
5 written on this form, it looks like he needs	5 MR. KOPPENHOEFER: He is talking
6 to be seen right away, meaning he needs to be	6 about right here (indicating).
7 seen by a medical doctor?	7 THE WITNESS: It says needs glasses.
8 A Yes.	8 MR. KOPPENHOEFER: Zero.
9 Q So would you review this first form	9 THE WITNESS: No open wound. .
10 before then filling out these second two	10 MR. KOPPENHOEFER: In other words,
11 pages?	11 that's a zero in front.
12 A Yes.	12 THE WITNESS: No open wounds.
13 Q So I know that you didn't complete	13 MR. KOPPENHOEFER: All right.
14 the first form, but my knowledge of medical	14 BY MR. TRUBAC:
15 acumen is not so great.	15 Q And then under assessment on the
16 On the first page, do you see	16 third line, it says -- has something of
17 where it says surgeries in the middle of the	17 seizures and then it looks like HTN.
18 page?	18 Is that hypertension?
19 A Gunshot wound --	19 A Hypertension. HTN.
20 MR. KOPPENHOEFER: Wait for the	20 Q And then the next line?
21 question.	21 A See above notes.
22 BY MR. TRUBAC:	22 Q Thank you. You can read this way
23 Q It says GSW in back, I think.	23 better than I can.
24 Does GSW stand for gunshot	24 Let's move to the second page

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
45-48

Page 45	Page 47
<p>1 then. So my understanding is you filled out 2 this second and third page after reviewing the 3 first page, correct?</p> <p>4 A Correct.</p> <p>5 Q Now, I see a bunch of handwritten 6 notes that look like they say WNL. Is that 7 within normal limits?</p> <p>8 A Correct. Within normal limits.</p> <p>9 Q Under lungs and chest, including 10 breast, CTA, what does that stand for?</p> <p>11 A Clear to auscultation. Clear to 12 auscultation when you try to hear the lungs.</p> <p>13 Q And then under assessment, can you 14 read us what your notes say?</p> <p>15 A No known allergy. Ethanol and drug 16 abuse. Self-reported back pain. History of 17 seizure disorder secondary to ethanol abuse.</p> <p>18 No medication taken. History of high blood.</p> <p>19 No other problem at this time.</p> <p>20 Q And then on the third page on the 21 bottom, do you see where it says past 22 hospitalizations on the bottom? Do you see 23 that?</p> <p>24 A Right. I see it.</p>	<p>1 BY MR. TRUBAC:</p> <p>2 Q Right.</p> <p>3 Do they get filed in the 4 healthcare unit or something?</p> <p>5 A Yes.</p> <p>6 Q Do you have access to the papers 7 after they are filed?</p> <p>8 A We have access.</p> <p>9 Q So if an inmate is taken to the 10 healthcare unit, you mentioned that normally 11 you wouldn't be able to -- normally you don't 12 see a document like this before you examine a 13 patient, correct?</p> <p>14 MR. KOPPENHOEFER: Well, that was 15 when they were brought down for an injury.</p> <p>16 MR. TRUBAC: I'm sorry. I will 17 clarify.</p> <p>18 Q You said before if an inmate is 19 brought into the healthcare unit for an injury 20 and they need to be seen by a physician right 21 away, normally you wouldn't see this type of 22 report?</p> <p>23 A Not normally we don't.</p> <p>24 Q But you have access to it?</p>
Page 46	Page 48
<p>1 Q You have to answer. 2 Did you also fill out this 3 section right here?</p> <p>4 A Yes. I asked him these questions.</p> <p>5 Q And so tell me if I am incorrect, but 6 this says diagnosis, gunshot wound to head and 7 back?</p> <p>8 A Back and head.</p> <p>9 Q In the 1990's.</p> <p>10 Then another diagnosis for head 11 trauma; and, what is that?</p> <p>12 A Secondary to accident.</p> <p>13 Q Also in the 1990's.</p> <p>14 Okay. What would happen to this 15 intake form after you filled it out?</p> <p>16 A After we fill this out, then he would 17 be followed. In case they get another 18 problem, they go for sick call.</p> <p>19 Q What would happen to this form?</p> <p>20 Where would it be stored?</p> <p>21 A We just deliver the medication so --</p> <p>22 MR. KOPPENHOEFER: He wants to know 23 what happens to the papers.</p> <p>24</p>	<p>1 A We have access.</p> <p>2 Q How long would it take to find this 3 report?</p> <p>4 A I really don't know.</p> <p>5 MR. TRUBAC: Okay.</p> <p>6 Let's move on to -- we will mark 7 Exhibit 3, and then I will ask you to take a 8 look at it and see if you recognize it.</p> <p>9 (Document marked Exhibit 3 10 for Identification.)</p> <p>11 BY MR. TRUBAC:</p> <p>12 Q Take a look at this document and tell 13 me if you recognize it.</p> <p>14 A Yes.</p> <p>15 Q What is this?</p> <p>16 A This is my penmanship. I see him 17 after he get into a fight with his cellmate.</p> <p>18 Q This is your report of Cedric 19 Johnson, the Plaintiff, after he was taken to 20 the healthcare unit after his reported fight 21 with his cellmate; is that correct?</p> <p>22 A I didn't get your --</p> <p>23 Q Sure.</p> <p>24 Am I correct that this is your</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
49-52

<p style="text-align: right;">Page 49</p> <p>1 notes of your examination of the Plaintiff, 2 Cedric Johnson, after you examined him at the 3 healthcare unit on March 10, 2014, after his 4 fight with his cellmate?</p> <p>5 A Correct.</p> <p>6 Q That's correct?</p> <p>7 A Yes.</p> <p>8 Q Okay. Just to clarify, I think in 9 the answer to your interrogatories, you 10 certified that your signature is at the bottom 11 of this page. I think it might be that 12 scribble; is that correct?</p> <p>13 A Yes. That's my scribble.</p> <p>14 Q And I believe there is another 15 signature underneath that. It looks like it 16 is signed by a CMT, certified medical 17 technician?</p> <p>18 A Probably.</p> <p>19 Q Are these forms always signed by more 20 than one person?</p> <p>21 A My signature?</p> <p>22 Q No. You fill out this form and you 23 sign it?</p> <p>24 A Correct.</p>	<p style="text-align: right;">Page 51</p> <p>1 I'm not sure what the easiest 2 way there is to read it because there are 3 three columns, so whatever way makes the most 4 sense to you, if you would read what you have 5 written here for us.</p> <p>6 Take your time and speak real 7 clearly so she can get everything down.</p> <p>8 MR. TRUBAC: If you can't understand 9 your own handwriting, don't make something up.</p> <p>10 THE WITNESS: I saw him on 3-10 --</p> <p>11 MR. KOPPENHOEFER: Don't describe 12 it. Read it.</p> <p>13 MR. TRUBAC: Why I want you to do 14 this is so we can get an understanding of what 15 this document says. So just read verbatim, 16 word for word what it says.</p> <p>17 THE WITNESS: Okay.</p> <p>18 S, subjective, claim had 19 altercation with his cellie this morning and 20 was hit in the face. Now claim hurt, left eye 21 and blurry. O, objective, alert, not in 22 distress. Left orbit, superficial laceration 23 noted on the -- inside the lid. Superficial 24 laceration noted on the inside of the lid,</p>
<p style="text-align: right;">Page 50</p> <p>1 Q But there are two signatures on this 2 page.</p> <p>3 Are these forms always signed by 4 two people, or --</p> <p>5 A Probably one. One people.</p> <p>6 Q But in this case, there happened to 7 be two?</p> <p>8 A Correct.</p> <p>9 MR. KOPPENHOEFER: Do you want him to 10 explain why?</p> <p>11 MR. TRUBAC: If you want him to, you 12 can explain why.</p> <p>13 THE WITNESS: Whenever we do 14 something, it has to be countersigned by a med 15 tech or a nurse so we can file it.</p> <p>16 BY MR. TRUBAC:</p> <p>17 Q So it's really for filing purposes?</p> <p>18 A Correct.</p> <p>19 Q I apologize, but I am going to ask 20 you to just read out just because it is 21 difficult to read the handwriting.</p> <p>22 MR. KOPPENHOEFER: Are you done with 23 your question?</p> <p>24 MR. TRUBAC: Yes.</p>	<p style="text-align: right;">Page 52</p> <p>1 upper eye, about two to three millimeter in 2 size; two to three millimeter in size. Also 3 abrasion superior noted around the orbit. 4 Unable to check eye due to swelling. Right 5 orbit lower orbit abrasion noted; and the 6 forehead, slight swelling, no tenderness.</p> <p>7 MR. TRUBAC: I'm sorry. Where was 8 that?</p> <p>9 MR. KOPPENHOEFER: That is right 10 underneath the line with the O.</p> <p>11 THE WITNESS: Then assessment, 12 superficial laceration slash abrasion both 13 orbit secondary to trauma.</p> <p>14 BY MR. TRUBAC:</p> <p>15 Q Does that conclude this column?</p> <p>16 A Right.</p> <p>17 Q And I guess, before you continue, so 18 on the left column where it says date and 19 time, 3-10-2014, then it says 8:10 a.m., is 20 that 8:10 in the morning?</p> <p>21 A Yes. 8:10 in the morning.</p> <p>22 Q Would that be when you were examining 23 Mr. Johnson, the Plaintiff?</p> <p>24 A Yes.</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
53-56

Page 53	Page 55
<p>1 Q Looks like there was a blood pressure 2 reading and something else and underneath that 3 it says 12-18. What is 12-18?</p> <p>4 A I think that could be respirations.</p> <p>5 Q I am glad you are here to decipher 6 for us.</p> <p>7 So can you read the third 8 column, plans?</p> <p>9 A Plan is call IA, Internal Affairs. 10 X-ray, skull x-ray, and x-ray of left orbit. 11 We ordered bloodwork, RPR, 12 protein profile and HIV and tetanus 13 toxoid, IM stat. Then Neosporin slash 14 Polysporin slash Bacitracin Ointment, apply to 15 the left eye two times a day for five days was 16 given. Then follow-up two day slash PRN.</p> <p>17 Q What is PRN?</p> <p>18 A Whenever he --</p> <p>19 Q Oh, yes, you said that before.</p> <p>20 A Ice compress, Tylenol 325, two 21 tablets every four to six hours, number 16 22 given.</p> <p>23 Q So my understanding is that -- from 24 your notes is that you were unable to check</p>	<p>1 hard to examine the eye.</p> <p>2 Q So am I correct that it is likely 3 that his eyes -- left eye, or whichever eye 4 was so swollen that it was difficult to open 5 the eye to examine it?</p> <p>6 A It's possible.</p> <p>7 Q Is it likely?</p> <p>8 A Probable.</p> <p>9 Q But in any respect, you weren't able 10 to examine the actual eye during this 11 examination?</p> <p>12 A Correct.</p> <p>13 Q So when you ordered the follow-up 14 after two days, how does that work, scheduling 15 the follow-up visit?</p> <p>16 A We have a system where we will see 17 them the following day up to two weeks later, 18 so we see them.</p> <p>19 Q The follow-up after two days, is that 20 a follow-up with medical doctor, or might it 21 just --</p> <p>22 A Any provider. Either me or the PA.</p> <p>23 Q So it could be a physician's 24 assistant. Could it be a registered nurse?</p>
Page 54	Page 56
<p>1 Mr. Johnson's eyes because of the swelling, 2 correct?</p> <p>3 A Correct.</p> <p>4 Q So the plan was to have him follow-up 5 after two days, and you prescribed -- I think 6 you said -- was it Tylenol?</p> <p>7 A Tylenol.</p> <p>8 Q And also ointment to -- eye ointment 9 to apply to his left eye?</p> <p>10 A Yes.</p> <p>11 Q And what was the purpose for the 12 ointment?</p> <p>13 A Just for the abrasion to the eye, the 14 abrasion or the cut.</p> <p>15 Q Do you see where Mr. Johnson 16 complained of his left eye was blurry?</p> <p>17 A That's what he said.</p> <p>18 Q Underneath you said that you were 19 unable to check eyes.</p> <p>20 When you say unable to check 21 eyes, I know that you mentioned you saw 22 lacerations on the eyelid. What does it mean 23 unable to check eyes?</p> <p>24 A Because of the swelling eye, it was</p>	<p>1 A Or nurse practitioner?</p> <p>2 Q So it has to be at least a nurse 3 practitioner, or a physician's assistant?</p> <p>4 A Or me.</p> <p>5 Q Or you.</p> <p>6 Are there any times when do you 7 an examination and you order a follow-up, and 8 you make sure that you are the one who does 9 the follow-up examination as opposed to a 10 nurse practitioner or physician assistant?</p> <p>11 A Well, since there are three of us, 12 anybody can see them. If they have any 13 question, they can ask us.</p> <p>14 Q I know that this was a number of 15 years ago, but given that Mr. Johnson 16 complained of his left eye was blurry and then 17 you were unable to check his left eye because 18 of the swelling, given the trauma to his eye, 19 is it possible -- I'm not asking you to draw 20 any conclusions as to this particular case -- 21 but is it possible that there could have been 22 serious injury to the eye that you couldn't 23 see because he couldn't open the eye?</p> <p>24 A It's possible.</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
57-60

Page 57	Page 59
<p>1 MR. KOPPENHOEFER: Objection, 2 foundation, incomplete hypothetical; also, 3 speculation.</p> <p>4 THE WITNESS: It's possible.</p> <p>5 BY MR. TRUBAC:</p> <p>6 Q Is it -- in your knowledge as a 7 medical doctor, is it possible for someone to 8 develop symptoms -- is it possible for trauma 9 to the eye to be so serious that it causes 10 something like blindness or cataracts maybe or 11 something like that?</p> <p>12 A I don't know.</p> <p>13 Q You don't know?</p> <p>14 A I don't know.</p> <p>15 Q Is that because you are not an 16 ophthalmologist, or just because --</p> <p>17 A I really don't know. I really can't 18 answer.</p> <p>19 Q Do you ever order a follow-up -- do 20 you ever refer out an inmate for a follow-up 21 with a doctor who specializes in a certain 22 area?</p> <p>23 So say in this case, you were 24 unable to check Mr. Johnson's eyes because of</p>	<p>1 injury.</p> <p>2 Q So even though you couldn't examine 3 the eye --</p> <p>4 A Yes.</p> <p>5 Q So the swelling in the eye which 6 meant that you couldn't check it, that was 7 considered superficial.</p> <p>8 MR. KOPPENHOEFER: Objection.</p> <p>9 Argumentative. You can answer over his 10 objection. Go ahead.</p> <p>11 THE WITNESS: Swelling meant -- just 12 like the eye -- like you cover the eye. You 13 could not see the eye socket because of the 14 impact, the injury.</p> <p>15 MR. TRUBAC: This would be 16 Exhibit 4.</p> <p>17 (Document marked Exhibit 4 18 for Identification.)</p> <p>19 BY MR. TRUBAC:</p> <p>20 Q Take a look at this document and let 21 me know do you recognize the document?</p> <p>22 A Yes.</p> <p>23 Q What is this?</p> <p>24 A This is the x-ray I ordered of the</p>
Page 58	Page 60
<p>1 swelling, and you noted that he should have 2 additional follow-up after two days.</p> <p>3 Would you ever because of the 4 nature of the injury, the eye injury, would 5 you order a follow-up with an ophthalmologist?</p> <p>6 A Yes.</p> <p>7 MR. KOPPENHOEFER: Object to 8 foundation. Calls for speculation, and it 9 assumes facts not in evidence.</p> <p>10 MR. TRUBAC: You can answer.</p> <p>11 THE WITNESS: Yes.</p> <p>12 BY MR. TRUBAC:</p> <p>13 Q So in this case, where it says 14 follow-up after two days, was there a -- in 15 your experience as a doctor, would this be a 16 case where you would refer out Mr. Johnson to 17 be seen by an ophthalmologist because of the 18 injury to his eye?</p> <p>19 MR. KOPPENHOEFER: Same objection.</p> <p>20 THE WITNESS: Not at the time that I 21 saw him.</p> <p>22 BY MR. TRUBAC:</p> <p>23 Q And why is that?</p> <p>24 A Because it was only a superficial</p>	<p>1 left orbit.</p> <p>2 Q And that means for the left eye?</p> <p>3 A Yes.</p> <p>4 Q And I think this is the x-ray that 5 was ordered, and this x-ray was mentioned 6 specifically in Exhibit 3, under plan, 7 correct?</p> <p>8 A Yes.</p> <p>9 Q So this is the x-ray --</p> <p>10 A Result.</p> <p>11 Q Result.</p> <p>12 And under referring physician on 13 the bottom, is that your signature, your name 14 and signature?</p> <p>15 A Correct.</p> <p>16 Q Did you fill out this form?</p> <p>17 A I filled out this form.</p> <p>18 Q And so same thing again because it is 19 difficult for me to read your handwriting.</p> <p>20 This is the patient's name, Cedric Johnson.</p> <p>21 Can you just read from examination requested 22 down?</p> <p>23 MR. KOPPENHOEFER: Just to clarify, 24 the report part is by a different physician.</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
61-64

Page 61	Page 63
<p>1 Do you know what I mean?</p> <p>2 MR. TRUBAC: Let me ask the doctor.</p> <p>3 BY MR. TRUBAC:</p> <p>4 Q So you signed this form at the bottom, correct?</p> <p>5 A Correct.</p> <p>6 Q The rest of the form, patient name, offender number, examination requested, history of symptoms report, did you also fill out that as well, or is that filled out by someone else?</p> <p>7 A I filled out the history and symptoms.</p> <p>8 Q Underneath that where it says report, that was filled out by someone else?</p> <p>9 A That is the specialist, the radiologist.</p> <p>10 Q Can you -- so request date, March 10, 2014, can you read to us history slash symptoms, what that says?</p> <p>11 A Superficial abrasion, laceration, left orbit, trauma of the forehead.</p> <p>12 Q Trauma of the forehead?</p> <p>13 A Trauma, yeah, forehead.</p>	<p>1 his head?</p> <p>2 A I don't understand.</p> <p>3 Q So when you said because of the history of trauma, how did you know there was a history of trauma?</p> <p>4 A He was involved in a fight.</p> <p>5 Q My understanding of a history of trauma means there were events in the past that also --</p> <p>6 MR. KOPPENHOFER: History means five minutes ago.</p> <p>7 MR. TRUBAC: Is that right?</p> <p>8 THE WITNESS: Yes.</p> <p>9 BY MR. TRUBAC:</p> <p>10 Q So history of trauma doesn't necessarily mean, you know, like --</p> <p>11 A Ten years ago.</p> <p>12 Q Okay.</p> <p>13 So history of trauma could mean this specific incident?</p> <p>14 A Correct.</p> <p>15 Q So the -- do you order -- would you see this report after it was completed, after Mr. Johnson had the x-ray taken?</p>
Page 62	Page 64
<p>1 Q And then the report, that was filled out by someone else, correct?</p> <p>2 A Yes. The radiologists write their report.</p> <p>3 Q So I know that you didn't fill this out; but, again, GSW, I am assuming that means gunshot wound?</p> <p>4 A Correct.</p> <p>5 Q And then the R that is circled, do you have an understanding of what that means?</p> <p>6 A That is --</p> <p>7 Q If you don't --</p> <p>8 A Right occipital area.</p> <p>9 Q Let me ask you this.</p> <p>10 What made you order this x-ray?</p> <p>11 You examined Mr. Johnson and one of the things you ordered was an x-ray.</p> <p>12 A Because of the history of trauma of the face and the forehead. Because of the history of trauma. That's why I have to order this thing.</p> <p>13 Q So history of trauma, you are referring to what Mr. Johnson told you during the examination of the history of trauma to</p>	<p>1 A I did not see this report after it was completed.</p> <p>2 Q Was it just filed away?</p> <p>3 A Somebody saw it. I don't know who it was.</p> <p>4 Q Would someone other than the technician who filled this out, would someone then read this report?</p> <p>5 A Someone would read the report.</p> <p>6 Q And if they noticed something, if they noticed something -- all right. Okay.</p> <p>7 So you wouldn't see this completed form after it was filled out?</p> <p>8 A I never see it.</p> <p>9 Q So you order the x-ray and fill out the history and symptoms, and then you don't see this form again, correct?</p> <p>10 A Correct.</p> <p>11 Q Is there a reason -- I apologize if I am asking the same question I asked before, but is there a reason why after you order an x-ray you wouldn't then look -- you personally then wouldn't look at the result?</p> <p>12 A There are two doctors. Whoever is</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
65-68

<p style="text-align: right;">Page 65</p> <p>1 available can sign the x-rays. Whoever is 2 available. 3 Q So it's possible that you would be 4 the doctor who would look at this after 5 follow-up, but it is also possible it could be 6 someone else; is that correct? 7 A Correct. 8 MR. TRUBAC: I have one more exhibit. 9 Mark this as 5. 10 Take a look at this document and 11 let me know when you are finished reading it. 12 (Document marked Exhibit 5 13 for Identification.) 14 BY MR. TRUBAC: 15 Q You have reviewed it? 16 A I haven't read it. 17 Q But you have looked at the document? 18 A Correct. 19 Q Is your signature on this document? 20 Did you fill out this document? 21 A No. 22 Q So do you recognize any of the 23 signatures on the bottom of this page? 24 A I'm not very sure.</p>	<p style="text-align: right;">Page 67</p> <p>1 report and then there is a follow-up report, 2 what generally happens to the follow-up 3 report? They are just placed in the file for 4 the inmate? 5 A Yes. 6 Q Is there -- is there any either 7 procedure, or regulation, or something like 8 that where you who is the first person who 9 sees an inmate and fills out the initial form 10 we just looked at and then orders a follow-up, 11 do you ever review the follow-up notes since 12 you were the doctor who initially saw and 13 examined the patient? 14 A No. 15 Q And why not? 16 A Because as I said again, for 17 follow-up, any provider can see him unless the 18 guy who see him ask a question. Then I will 19 talk to him. 20 Q As a medical doctor -- when you were 21 in your private practice in the south side in 22 the -- was it the 1970's to the 1980's? 23 A 1979 to 2001. 24 Q Was it just you, or were there other</p>
<p style="text-align: right;">Page 66</p> <p>1 Q It looks like this was filled out on 2 March 14, 2014, correct? 3 A Correct. 4 Q And PA note, I am assuming, means 5 physician assistant? 6 A Correct. 7 Q So this looks to me to be notes from 8 a follow-up visit of Mr. Johnson after he had 9 the fight on the 10th? 10 A Correct. 11 Q And I think you said earlier that you 12 would have ordered a follow-up visit within 13 two days and that follow-up could have been 14 with anyone who was available at that time? 15 A Correct. 16 Q And so in this case, it looks like it 17 was a physician's assistant who saw 18 Mr. Johnson? 19 A Correct. 20 Q Dr. Aguinaldo, have you ever -- have 21 you ever seen this document before prior to 22 today? 23 A No. 24 Q So after you fill out the initial</p>	<p style="text-align: right;">Page 68</p> <p>1 doctors in the practice? 2 A I was the only physician. 3 Q And just to reiterate, you are a 4 general practitioner. You don't have any -- 5 you're not a specialist in any area, correct? 6 A Correct. 7 MR. TRUBAC: That's all I've got. 8 MR. KOPPENHOEFER: Let's take a quick 9 break. Let's go off the record for a second. 10 (Brief recess.) 11 MR. KOPPENHOEFER: Back on the 12 record. 13 E X A M I N A T I O N 14 BY MR. KOPPENHOEFER: 15 Q Doctor, turning to Exhibit 2, you saw 16 this gentleman when he came into the NRC on 17 March 4, 2014, true? 18 A True. 19 Q And you prescribed some medication 20 for him at that time? 21 A Correct. 22 Q What did you prescribe for him? 23 A Norvasc, Metoprolol, Lisinopril, and 24 Doxazosin.</p>

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
69-72

Page 69	Page 71
1 Q And what is this?	1 the skull and the orbit, right?
2 A Low bunk permit.	2 A Correct.
3 Q And you gave him a permit to be on a	3 Q And you were shown that earlier, the
4 low bunk?	4 requisition and the report are included in
5 A Permit.	5 Exhibit 4, true?
6 Q Now, the nurse does her own form, but	6 A True.
7 she reports some different things, too,	7 Q And the radiologist who interpreted
8 correct?	8 the x-ray on March 11 is Dr. Leef, correct?
9 A Correct.	9 A Right.
10 Q She reported that he had 2300 vision	10 Q L-e-e-f.
11 in both eyes, correct?	11 And he found no new pathology,
12 A That's correct.	12 true?
13 Q And he needs glasses?	13 A True.
14 A Correct.	14 Q That means there were no acute
15 Q Now, 2300 vision is poor, true?	15 injuries seen on those x-rays, right?
16 A True.	16 A Right.
17 Q And then your next interaction with	17 MR. TRUBAC: Objection,
18 this gentleman would have been on March 10,	18 speculation -- hearsay.
19 2014, true?	19 BY MR. KOPPENHOFER:
20 A True.	20 Q He did, however, see fragments from a
21 Q And that is when he was brought into	21 bullet in the man's head, right?
22 the healthcare unit based on an acute incident	22 A Right.
23 when he was hit several times by his cellmate,	23 MR. TRUBAC: Objection.
24 right?	24 I am just going to make a
Page 70	Page 72
1 A Right.	1 blanket hearsay objection to anything that the
2 Q And you described to us earlier as in	2 specialist or the doctor found.
3 that particular situation the medical chart	3 MR. KOPPENHOFER: Off the record.
4 would not be there with him, true?	4 (Discussion off the record.)
5 A True.	5 BY MR. KOPPENHOFER:
6 Q At that time, there was no apparent	6 Q And to further evaluate, you asked a
7 injury to the eye itself, true?	7 follow-up appointment be scheduled in two days
8 A True.	8 or as needed, correct?
9 Q Nevertheless, you observed some	9 A Correct.
10 superficial injuries to the orbits. That	10 Q Meaning that Mr. Johnson could come
11 means the bones around the eyes, right?	11 in earlier, if his symptoms got worse, true?
12 A Yes.	12 A Correct.
13 Q Well, the skin that covers the bones	13 Q And the purpose of that was to take
14 around the eyes, correct?	14 another look at him after the swelling had
15 A Correct.	15 gone down, right?
16 Q And you saw some abrasions and some	16 A Correct.
17 swelling, right?	17 Q To see if his symptoms had improved,
18 A Correct.	18 stayed the same, or gotten worse, correct?
19 Q You could see the eye, but you	19 A Correct.
20 couldn't open up the eye all the way because	20 Q You also ordered an ice compress for
21 of the swelling; is that right?	21 him, right?
22 A Correct.	22 A Correct.
23 Q Now to further investigate the	23 Q That is to help the swelling resolve?
24 possibility of injury, you ordered an x-ray of	24 A Correct.

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
73-76

Page 73	Page 75
1 Q You also ordered Tylenol for pain?	1 A True.
2 A Correct.	2 Q And he is seen by a physician
3 Q And, in fact, he left the healthcare	3 assistant, right?
4 unit that day with 16 tablets, true?	4 A Right.
5 A Correct.	5 Q And that is consistent with your
6 Q Because of the abrasions, which is	6 plan, right?
7 open skin, you ordered a tetanus shot and that	7 A Correct.
8 was given to him, true?	8 Q That physician assistant also made
9 A Correct.	9 some orders for him, true?
10 Q Now, when your note is countersigned,	10 A Correct.
11 that means that the nurse followed the orders,	11 Q And, by the way, a physician
12 right?	12 assistant makes orders just like a doctor,
13 A Correct.	13 right?
14 Q And I have another question about the	14 A Correct.
15 x-ray report.	15 Q The only difference is she is working
16 So referring then to Exhibit 4,	16 under the supervision of a doctor?
17 in the lower right-hand corner there is	17 A Correct.
18 somebody's initials and the date of March 11,	18 Q Do you know who the supervising
19 2014, right?	19 physician is?
20 A Right.	20 A I don't know.
21 Q That means some other doctor reviewed	21 Q So she ordered Metoprolol?
22 that, right?	22 A Correct.
23 A Correct.	23 Q Naprosyn?
24 Q In other words, Dr. Leef issued his	24 A Correct.
Page 74	Page 76
1 interpretation, and this was seen and signed	1 Q And Naprosyn is an anti-inflammatory?
2 off on by a doctor at the healthcare unit?	2 A Correct.
3 A Correct.	3 Q And that is used to reduce pain?
4 Q You don't recognize those initials;	4 A Correct.
5 is that true?	5 Q And swelling perhaps?
6 A No.	6 A Correct.
7 Q But that's what that means; is that	7 Q And she also asked for a follow-up
8 correct?	8 with optometry, correct?
9 A Yes.	9 A Correct.
10 Q By the way, the staff in the	10 Q And she put in parenthesis here
11 healthcare unit operate as a team; is that	11 Stateville; and, that means over here?
12 correct?	12 A Probably over here.
13 A Correct.	13 Q And what did you call that again?
14 Q So you don't have your own individual	14 A Stateville proper.
15 patients that are permanently assigned to you	15 Q So there is an optometrist that works
16 in the prison; is that true?	16 here, right?
17 A Correct.	17 A Correct.
18 Q One doctor, physician assistant,	18 Q Now, in her notes, the physician
19 nurse, picks up on what you have both done and	19 assistant has got S slash R improving, right?
20 anybody can take over on a particular day?	20 Do you see that?
21 A Correct.	21 A That's what she said.
22 Q Now, then the patient is scheduled	22 Q And that means the patient has
23 for the follow-up as you requested, and he	23 self-reported that his eye condition is
24 comes in on March 14, 2014, true?	24 improving; is that true?

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
77-80

Page 77	Page 79
1 A True.	1 and somebody fills out a pass to have him
2 Q So, presumably, four days later now,	2 brought down to the healthcare unit, correct?
3 the swelling has eased somewhat, and she is	3 A True.
4 able to get a better look at his eye; is that	4 Q There is pharmacy personnel that
5 right?	5 fills out the prescriptions, right?
6 A Possible.	6 A Right.
7 Q By the way, if you had asked somebody	7 Q There are nurses that administer the
8 else to take a look at Mr. Johnson on	8 medications, right?
9 March 10, they would have encountered the same	9 A True.
10 situation as you did where it was hard to get	10 Q Once you enter those orders, it is
11 his eyes all the way open because of the	11 your anticipation that those orders will be
12 swelling, right?	12 carried out, true?
13 A Yes.	13 A Correct.
14 Q When you saw Mr. Johnson on March 10,	14 Q I want to clear something up.
15 did he complain of spots in his vision?	15 When someone comes down to the
16 A Repeat the question.	16 healthcare unit, they don't always need to be
17 Q When you saw Mr. Johnson on March 10,	17 seen by a medical doctor, true?
18 did he complain of spots in his vision?	18 A True.
19 A No. Not according to my note.	19 Q Some conditions, for example, if a
20 Q If he had, you would have documented	20 patient appears to have a cold, might be
21 it, right?	21 handled by a nurse, right?
22 A Correct.	22 A Correct.
23 Q Did he complain of headaches to you	23 Q The physician assistant we already
24 on that date?	24 talked about operates almost at essentially at
Page 78	Page 80
1 A He didn't say anything about	1 the same level as a physician, right?
2 headaches according to my note.	2 A Correct.
3 Q Did you have any ill will toward	3 Q She can prescribe medication, right?
4 Mr. Johnson?	4 A Correct.
5 A No, sir.	5 Q Same with a nurse practitioner,
6 Q Do you now?	6 right?
7 A No, sir.	7 A Correct.
8 Q Do you have any desire to punish	8 Q When you see patients, it is
9 Mr. Johnson?	9 basically because they are brought in to see
10 A No, sir.	10 you by a nurse who has triaged the patient or
11 Q By the way, as far as you know,	11 because they are on a schedule that someone
12 March 10, 2014, is the last time you had any	12 has put them on to be seen by you, right?
13 involvement in the care of Mr. Johnson, true?	13 A Right.
14 A True.	14 Q Doctors don't go through the medical
15 Q When you issued your orders on that	15 records storage room looking through files, do
16 day, you would have been relying on other	16 they?
17 medical staff personnel to carry out those	17 A No.
18 orders and plans, true?	18 Q That was true basically -- that was
19 A True.	19 basically true in practice inside the prison
20 Q In terms of scheduling the follow-up	20 and outside of the prison, correct?
21 appointment, there are people that handle	21 A Right.
22 scheduling, true?	22 MR. TRUBAC: Objection, speculation.
23 A Correct.	23
24 Q Someone puts him on a list to be seen	24

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017
81-84

Page 81	Page 83
1 BY MR. KOPPENHOEFER:	1 FURTHER EXAMINATION
2 Q When a patient comes in for an	2 BY MR. TRUBAC:
3 appointment, there are staff members who	3 Q So you were looking at Exhibit 3
4 typically have the chart available and bring	4 before when your counsel was asking you some
5 it in for the doctor to see, correct?	5 questions. I believe either he or you said at
6 A Correct.	6 the time of your report there was no apparent
7 Q When the patient comes into the	7 injury to his eye; is that correct?
8 emergency room, because of the emergent nature	8 A Correct.
9 of their arrival that often is not there,	9 Q And at the same time you said that
10 right?	10 you couldn't check his eye because it was
11 A Correct.	11 swollen, correct?
12 Q When you saw Mr. Johnson on March 10,	12 A Correct.
13 2014, in your judgment there was no need for	13 Q And you also provided an opinion that
14 an additional referral beyond all the orders	14 if there was, in fact, any damage to
15 that you entered on that day, true?	15 Mr. Johnson's eye or head, stemming from the
16 A True.	16 initial fight, that your opinion is that that
17 Q You certainly weren't ruling out any	17 was caused by the fight itself rather than any
18 sort of further injury. In fact, you were	18 failure to provide medical care, correct?
19 exploring the possibility of that, correct?	19 A Correct.
20 A Correct.	20 Q But you also said you were not a
21 Q If Mr. Johnson had some lasting	21 specialist in eyes and don't really have a
22 injury that he incurred on March 10, 2014, is	22 background as an optometrist, correct?
23 it your opinion that it was caused by the	23 A Correct.
24 fight he was in and not some failure to	24 MR. KOPPENHOEFER: We will reserve.
Page 82	Page 84
1 provide care on your part?	1 MR. TRUBAC: PDF.
2 A Correct.	2 MR. KOPPENHOEFER: I would like an
3 Q And that is an opinion you hold to a	3 E-tran with the exhibits, please.
4 reasonable degree of medical certainty, true?	4 (AND FURTHER DEPONENT SAITH NOT.)
5 A Correct.	5
6 Q You were asked before about an	6
7 ophthalmologist, and I JUST want to be clear.	7
8 It is an optometrist that is here on site,	8
9 right?	9
10 A Correct.	10
11 Q So, typically, if a patient has an	11
12 eye issue, he is seen by an optometrist,	12
13 correct?	13
14 A Right.	14
15 Q Which in laymen's terms is an eye	15
16 doctor, right?	16
17 A Yes, absolutely.	17
18 Q So if you are making a referral for	18
19 someone to see an eye doctor, it is to an	19
20 optometrist, right?	20
21 A Correct.	21
22 MR. KOPPENHOEFER: Nothing else.	22
23 Anything?	23
24 MR. TRUBAC: Just one or two.	24

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDOJuly 11, 2017
85-88

Page 85	Page 87
1 STATE OF ILLINOIS) 2) SS. 3 COUNTY OF COOK) 4 5 I, RENEE C. KERR, a Certified 6 Shorthand Reporter in and for the County of 7 Cook and State of Illinois, do certify that 8 heretofore on, to-wit, July 11, 2017, 9 personally appeared before me at 10 16830 Broadway Street, Joliet, Illinois, 11 EVARISTO AGUINALDO, M.D., produced for 12 examination in said cause. 13 14 I further certify that the said 15 witness, EVARISTO AGUINALDO, M.D., was by me 16 first duly sworn to testify the truth, the 17 whole truth and nothing but the truth in the 18 cause aforesaid before the taking of the 19 deposition; that the testimony was reduced to 20 writing in the presence of said witness by 21 means of machine shorthand and afterwards 22 transcribed into typewriting, and that the 23 foregoing is a true and correct transcript of 24 the testimony given by said witness. I further certify that there were present at the taking of the deposition	1 DEPOSITION ERRATA SHEET 2 3 4 Our Assignment No. J0602783 5 Case Caption: CEDRIC LYN JOHNSON 6 vs. EVARISTO AGUINALDO 7 8 DECLARATION UNDER PENALTY OF PERJURY 9 I declare under penalty of perjury 10 that I have read the entire transcript of 11 my Deposition taken in the captioned matter 12 or the same has been read to me, and 13 the same is true and accurate, save and 14 except for changes and/or corrections, if 15 any, as indicated by me on the DEPOSITION 16 ERRATA SHEET hereof, with the understanding 17 that I offer these changes as if still under 18 oath. 19 Signed on the _____ day of 20 _____, 20____. 21 22 _____ 23 EVARISTO AGUINALDO, M.D. 24
Page 86	Page 88
1 MR. STEVEN G. TRUBAC, on behalf of the 2 Plaintiff; and, MR. JOEL M. KOPPENHOEFER, on 3 behalf of the Defendant. I further certify that I am not counsel for nor in any way related to any of the parties to this suit, nor am I in any way interested in the outcome thereof. I further certify that my certificate annexed hereto applies to the original and typewritten copies only, signed and certified transcripts only. I assume no responsibility for the accuracy of any reproduced copies not made under my control or direction. In testimony whereof, I have hereunto set my hand this 4th day of August, 2017. _____ Renée C. Kerr CSR No. 084-001508	1 DEPOSITION ERRATA SHEET 2 Page No. _____ Line No. _____ Change to: _____ 3 _____ 4 Reason for change: _____ 5 Page No. _____ Line No. _____ Change to: _____ 6 _____ 7 Reason for change: _____ 8 Page No. _____ Line No. _____ Change to: _____ 9 _____ 10 Reason for change: _____ 11 Page No. _____ Line No. _____ Change to: _____ 12 _____ 13 Reason for change: _____ 14 Page No. _____ Line No. _____ Change to: _____ 15 _____ 16 Reason for change: _____ 17 Page No. _____ Line No. _____ Change to: _____ 18 _____ 19 Reason for change: _____ 20 Page No. _____ Line No. _____ Change to: _____ 21 _____ 22 Reason for change: _____ 23 SIGNATURE: _____ DATE: _____ 24 EVARISTO AGUINALDO, M.D.

EVARISTO AGUINALDO, M.D.
CEDRIC LYN JOHNSON vs EVARISTO AGUINALDO

July 11, 2017

89

Page 89	
1	DEPOSITION ERRATA SHEET
2	Page No. _____ Line No. _____ Change to: _____
3	_____
4	Reason for change: _____
5	Page No. _____ Line No. _____ Change to: _____
6	_____
7	Reason for change: _____
8	Page No. _____ Line No. _____ Change to: _____
9	_____
10	Reason for change: _____
11	Page No. _____ Line No. _____ Change to: _____
12	_____
13	Reason for change: _____
14	Page No. _____ Line No. _____ Change to: _____
15	_____
16	Reason for change: _____
17	Page No. _____ Line No. _____ Change to: _____
18	_____
19	Reason for change: _____
20	Page No. _____ Line No. _____ Change to: _____
21	_____
22	Reason for change: _____
23	SIGNATURE: _____ DATE: _____
24	EVARISTO AGUINALDO, M.D.

ESQUIRE
DEPOSITION SOLUTIONSEXHIBIT B800.211.DEPo (3376)
EsquireSolutions.com